Des Moines, lows 50319

Fax: 515-281-4073

Parties must be filed electronically.

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JA ETHICS AND

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A

DISCLOSUR

Effective January 1, 2010, ai
for state office must be filed

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committeed JUL 19 PM 12: 27 for state office must be filed electronically and effective January 1, 2012, all statements and records filed by all committees for state office must be filed

statements and reports filed by all committees for state office must be filed electronically. Effective May 1, 2010, all statements and reports for State PACs and State

prance COMMITTEE NAME (Must be same as on Statement of Organization) Committee To Re-elect Dean DR-2 DISCLOSURE IMPORTANT: Indicate by # type of committee you are reporting for: 5

(1) Statewide/Legislative/Judge Standing for Referition Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (10) School Board or Other PAC (10) School Board Other PAC (10) School Board O (Rev. 12/2009) REPORT For Office Use Only Comm. # 11) Local Ballot Issue Logged in CANDIDATE COMMITTEES ONLY: Political Party (if applicable) Candidate Name Scanned)ean Computer District (if Senate or House) Audited Office Sought DUB-rvisor 000 n0050 Late reports are subject to possible civil and criminal penalties. Pursuant to lows Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports. DATE SIGNED GNATURE OF PERSON FIL REPORT FOR (1) ELECTION /(2) NON-ELECTION YEAR. Indicate by # (report date) ☐CHECK IF AMENDMENT TO REPORT DATED r Date of Election 010 Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. K enter County in (You must continue to file reports until a DR-3 is filed.) Flection is held STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) Schedule F: Loans Received total (Attach Schedule F) Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... (Schedule H applies to Candidates' Committees Only) SUB-TOTAL.....\$ SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) ("*also see debts and loans below)...... Schedule F: Loan Repayments total (Attach Schedule F)..... CASH ON HAND at the end of this reporting period (if final report balance must be zero) **UNPAID BILLS (From Schedule D - Attach Schedule D)..... *IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)\$ COUTSTANDING LOANS (From Schedule F - Attach Schedule F)......\$ YES NO CONSULTANT BREAKDOWN (Schedule G Attached?) CANDIDATE COMMITTEES ONLY: VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

FOR INSTRUCTIONS, SEE BACK OF FORM

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1. B	3		

SCHEDULE В MONETARY (Rev. 07/03) **EXPENDITURES**

> LI CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Commit	tee to Re	-elect Dean Koster	Supervisor	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursament) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
5-27-10	ID# CK# 2	AD EXPRESS + Lowegian Hewspape N.13 Cyille TA	Amertise for State Primary	\$104.00
	ID# CK#			
	ID# CK#		8. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	LIÓICETAITY FAR INDITURES
	ID# CK#			A 18.8 30% of 21.8.8 30% of 21.8.8 30% of
	ID# CK#			
	ID#			#UPENDED
	ID# CK#			į.
	ID# CK#			
			SUB-TOTAL	\$ 104.00

TOTAL (if last page of this schedule)

THIS BOX APPLI	S TO CANDIDATES	COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

(for Schedule B)